

# NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

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CITY OF RENO

574

NAME David Aiazzi  
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CITY, STATE, ZIP Reno, Nevada 89503  
TELEPHONE (775) 747-7711

LENGTH OF RESIDENCE IN NEVADA 49 Years  
LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE [per NRS 281.571(1)(a)] 26 years (from Aug 1979) Ward 5  
E-MAIL aiazzi@cityofreno.com

List all public offices for which this financial disclosure statement is required [NRS 281.571, Subsection 1(g)]:

| Public Office              | Elected (E) or Appointed (A) | Annual Compensation | Term or Date Appointed | ANNUAL<br>all elected and appointed public officers<br>(no later than Jan. 15 each year)<br>NRS 281.559(1)(b)<br>281.561(1)(b) | CANDIDATE<br>(no later than the 10 <sup>th</sup> day after the last day to qualify as a candidate)<br>NRS 281.561(1)(a) | APPOINTMENT<br>to fill unexpired term of an elected or appointed public officer<br>(within 30 days)<br>NRS 281.559(1)(a) |
|----------------------------|------------------------------|---------------------|------------------------|--|---|--|
| Reno City Council - Ward 5 |                              | \$ 55,153           | Nov 1996               | <input checked="" type="checkbox"/>  | <input type="checkbox"/>  | <input type="checkbox"/>   |
|                            |                              | \$                  |                        | <input type="checkbox"/>   | <input type="checkbox"/>  | <input type="checkbox"/>   |
|                            |                              | \$                  |                        | <input type="checkbox"/>   | <input type="checkbox"/>  | <input type="checkbox"/>   |

List all general sources of income for you and members of your household over 18 years of age [NRS 281.571, Subsection 1(b)]:

|                       | Self                                | Household Member                    |
|-----------------------|-------------------------------------|-------------------------------------|
| City of Reno          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Washoe Medical Center | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 1135 The Strand       | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                       | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                       | <input type="checkbox"/>            | <input type="checkbox"/>            |

List each creditor to whom you or a member of your household owes \$5,000 or more [except (1) debt secured by mortgage or deed of trust on real property which is not required to be listed below, and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281.571, Subsection 1(d)]:

|                                   | Self                                | Household Member                    |
|-----------------------------------|-------------------------------------|-------------------------------------|
| Citi Mortgage (1135 The Strand)   | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Bank of America (280 Island #705) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| JP Morgan Chase Bank              | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                   | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                                   | <input type="checkbox"/>            | <input type="checkbox"/>            |

List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281.571, Subsection 1(f)]:

|     | Self                                | Household Member                    |
|-----|-------------------------------------|-------------------------------------|
| N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |

List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281.571, Subsection 1(c)]:

| Specific Location | Particular Use |
|-------------------|----------------|
| 1135 The Strand   | Investment     |
| 280 Island #705   | Investment     |
|                   |                |
|                   |                |

List the identity of donor and value of each gift received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [except (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281.571, Subsection 1(e)]:

| Donor  | Value of Gift |
|--|---------------|
| (See Attached Form for additional information) | \$            |
|  | \$            |
|  | \$            |
|  | \$            |
|  | \$            |

**THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.**

Date: January 12, 2006

Signature: 

Appointed Public Officers  
Nevada Commission on Ethics  
3476 Executive Pointe Way, Suite 10  
Carson City, Nevada 89706  
775.687.5469 • 775.687.1279 fax

File completed form with:

Elected Public Officers and Candidates for Public Office  
Nevada Secretary of State, Elections Division  
101 North Carson Street, Suite 3  
Carson City, NV 89701  
775.684.5705 • 775.684.5718 fax

Revised 8/23/2005

## David Aiazzi

List the identity of donor and value of each gift received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [except (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281.571, Subsection 1(e)]:

| Date      | Donor  | Value of Gift |
|-----------|--|---------------|
| 1/19/2005 |  |               |
|           | Peppermill - #17419 - 90 West Grove - 89509                      | \$ 500.00     |
|           | Boomtown - PO Box 399 - Verdi - 89439                            | \$ 1,000.00   |
|           | William Kandt Trust - #94  | \$ 100.00     |
| 2/25/2005 |  |               |
|           | Q&D Construction - #072765 - 1050 S 21st - 89431                 | \$ 250.00     |
|           | R&K Homes - #3819-9960 Business Park Drive Ste 150-Sacto - 95827 | \$ 1,000.00   |
|           | Susan Asher-Ricker - #8474 - 1982 Sunfield - 89434               | \$ 200.00     |
|           | Susan Mayes-Smith - #1783 - 2808 Silverton Way - 89436           | \$ 75.00      |
|           | TOTAL DEPOSIT  | \$ 3,125.00   |